Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

		Lilout										
			S FILED - PART ( (Column 1)		(Column 2)		SMALL ENTITY TYPE		OR	OTHER SMALL		
TOTAL CLAIMS			8			RA	ΓE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			8 minus 20= *			X\$	9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ mi	nus 3 = *		X4	2=		OR	X84=		
ΜU	LTIPLE DEPEN	DENT CLAIM PI	RESENT			+14	0=		OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			TO		·	OR	TOTAL	750	
CLAIMS AS AMENDED - P. (Column 1)					2) (Column 3	3) SM/	SMALL ENTITY			OTHER THAN SMALL ENTITY		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT Y EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	*	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	=	X4.	2=		OR	X84=		
	FINST PRESE	NTATION OF M	OLTIPLE DE	PENDENT CL	Allvi	+14	0=		OR	+280=		
							OTAL		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)											<u> </u>	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	] =	X4	2=		OR	X84=		
┞	I MOT PRESE	MATIONOFW	OLITE DE	ENDENT CE	AllVI	+14	0=		OR	+280=		
	•					TO ADDIT	OTAL EEE		OR	TOTAL ADDIT, FEE		
	·	(Column 1)	•	(Column :					_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N N	Total	*	Minus	**	=	X\$	9=		OR	X\$18=		
NE NE	Independent	*	Minus	***	=	X4:	2=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT CL	AIM	┛┝┈						
	If the entry in colu	+14			OR	+280=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
1		nher Previously P					he an	nronriate ho	x in co	dumn 1		